DECLARATION/POWER OF ATTORNEY		Attorney Docket	Number	18040				
FOR								
UTILITY OR DESIGN PATENT APPLICATION		N First Named Inv	First Named Inventor Christopher D. V					
(37 CFR 1.63)				•	Ü			
,								
✓ Declaration Submitted	Declaration		COMPLETE IF KNOWN					
with Initial	Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required	Application Number Filing Date		Herewith				
Filing		Group Art Unit		Herewith				
		Examiner Name						
As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
HANDSET RADIOFREQUENCY FRONT END MODULE IN FINE PITCH QUAD FLAT NO LEAD (FQFP-N) PACKAGE								
the specification of which								
is attached hereto								
OR								
was filed on as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewe amended by any amendment spe	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT internatinal application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy	Attached?			
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO			
		41						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								
I hereby claim the bene	e) of any United States prov	isional application	(s) listed below.					
Application Number(s	Application Number(s) Filing Dat		A 33:4:	Additional provinced application				
60/462,791	04/14/200	3	numbe supple	 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. 				

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DECLARATION – Utility or Design Patent Application							
Direct all correspondence to: ☐ Customer Number or ☒ Correspondence address below							
Name	Name Michael Aronoff, Esquire						
Address							
Address 4550 New Linden Hill Road—Suite 140							
City	Wilmington State DE Zip 19808			Zip 19808-2952			
Country	USA	. Telep	hone (30	2) 633 2770	Fax (302) 633 2776		
POWER OF ATTORNEY							
I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:							
	Robert J. Kapalka Rej Michael J. Aronoff Rej Salvatore Anastasi Rej T. Daniel Christenbury Rej Paul A. Taufer Re Frank A. Cona Re Darius C. Gambino Re	gistration No gistration No gistration No gistration No gistration No gistration No gistration No gistration No gistration No	o. 34198 o. 37770 o. 39090 o. 31750 o. 35703 o. 38412 fo. 41472				
[x] I hereby appoint the practitioner(s) associated with Customer Number 035811 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.							
[] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).							
	•	DECLAR.	ATION				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
		☐ A petition	on has be	en filed for this unsigr	ned inventor		
Given Name (first and middle [if any]) Christopher Dirk Weigand							
Inventor's Signat	ure Mistagle Din	11 his	man		Date March 21,2004		
Residence/City:	Woburn	State MA		Country USA	Citizenship USA		
Mailing Address: 23A Holton Street							
Mailing Address:			····	1	1		
City: Woburn		State MA Page 2	2 of 31	Zip 01801-5232	Country USA		
	•	. [. 480 /	1				

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NAME OF SECOND INVENTOR.		☐ A petition has been filed for this unsigned inventor					
NAME OF SECOND INVENTOR: Given Name (first and middle [if any])		Family Name or Surname					
Thomas Aaron Winslow							
Inventor's Signature The Clay Wirth Date					Date 3/26/04		
Residence/City: Salem Sta		te VA Country USA		intry USA	Citizenship USA		
Mailing Address: 1204 Meadowview Drive							
Mailing Address:							
City: Salem	State	e VA		Zip 24153	Country USA		
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:	ME OF ADDITIONAL JOINT INVENTOR IF ANY		on has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Richard John		Family Name or Surname Giacchino					
Inventor's Signature				Date			
Residence/City: Peabody	State	e MA		Country USA	Citizenship USA		
Mailing Address: 12 Leblanc Drive							
Mailing Address:							
City: Peabody	State	e MA		Zip 01960	Country USA		
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:		A petition has be	en f	filed for this unsigne	ed inventor		
Given Name (first and middle [if any])		Family Name or Surname					
		Date					
Inventor's Signature							
Residence/City:	State	te Country		Country	Citizenship		
Mailing Address							
Mailing Address							
City State		e		Zip	Country		
AME OF ADDITIONAL JOINT INVENTOR, IF ANY:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature				Date			
Residence/City:	.		Country	Citizenship			
Mailing Address							
Mailing Address							
City	State			Zip	Country		

[] Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 3 of 3]

NAME OF SECOND INVENTOR:		☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Thomas Aaron		Family Name or Surname Winslow					
Inventor's Signature Date							
Residence/City: Salem		ate VA Country USA		y USA	Citizenship USA		
Mailing Address: 1204 Meadowview Drive							
Mailing Address:							
City: Salem	State V	/A	Zip	24153	Country USA		
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:					ed inventor		
Given Name (first and middle [if any]) Family N Richard John Giacchin			ily Name or Surname				
Inventor's Signature Ruhall	Yea	uh	$\overline{\mathbb{Q}}$		Date 3-30-04		
Residence/City: Peabody	State N	ΛA	Cor	intry USA	Citizenship USA		
Mailing Address: 12 Leblanc Drive							
Mailing Address:							
City: Peabody	State N	ЛА	Zip	01960	Country USA		
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY:		☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature					Date		
Residence/City:	State		Cor	antry	Citizenship		
Mailing Address							
Mailing Address							
City	State		2.	ip	Country		
NAME OF ADDITIONAL JOINT INVENTOR, IF ANY: A petition has been filed for this unsigned inventor					ed inventor		
Given Name (first and middle [if any])		Family Name or Surname					
					Date		
Inventor's Signature	ī						
Residence/City: St		tate Country			Citizenship		
Mailing Address							
Mailing Address							
City		State		ip	Country		

[] Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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